



CALIFORNIA BOARD OF ACCOUNTANCY
2000 EVERGREEN STREET, SUITE 250
SACRAMENTO, CA 95815-3832
TELEPHONE: (916) 263-3680
FACSIMILE: (916) 263-3675
WEB ADDRESS: <http://www.dca.ca.gov/cba>



INSTRUCTIONS FOR CERTIFICATION OF BOARD RECORD(S) REQUEST

California Certified Public Accountants and Uniform CPA Examination candidates interested in transferring their CPA examination grades and/or license status to another state are encouraged to inquire about that state's requirements **prior** to submitting a Certification of Board Record(s) Request.

Step 1. Please carefully review all of the Certification of Board Record(s) information posted on this Web site.

If you have questions or are unable to locate the information you need, please fax your questions to (916) 236-3676, email to licensinginfo@cba.ca.gov, or contact Board staff at (916) 561-1701.

Step 2. Complete the Request for Certification of Board Records on Page 3.

To make a grades or license transfer to another state, you should obtain an "Authorization for Release of Examination and Licensure Information" form from that state. Please complete your portion of the form, **affix your signature**, and forward it to the California Board office for completion. If your state of choice does not have a grades transfer form, you may visit the Board's Web site for the Request for Certification of Board Record(s) form, or submit a written request to the Board asking for a transfer of information to the specified state. You must clearly identify what information is to be transferred. It is not necessary to provide a self-addressed stamped envelope, as the Board provides official envelopes for mailing certification requests to other state boards.

Step 3. Complete the Certification Selection Chart on Page 4.

Using the Certification Selection Chart on page 4, choose the type and number of certifications needed and calculate the total fee required.

Step 4. Complete the Required Additional Information section on Page 5.

After determining the type of certification needed from the Certification Selection Chart on page 4, complete the section that corresponds with the type of certification requested. **It is very important that you provide as much identifying information as possible.**

Step 5. Remit \$25 for each certification with your completed request form.

The Board charges \$25 for each certification. This includes letters confirming grades received on the Uniform CPA Examination, confirmation of CPA licensure, verification of firm licensure, requests for employer licensure verifications, and certified copies of Certificates of Experience – (formerly Form E or Form G) or transcripts.

Payment must be made by check, cashier's check, or money order, payable to the California Board of Accountancy. Foreign applicants must verify with their bank that the check is issued by a United States-affiliated bank and the United States Federal Reserve bank account number is printed on the check.

Step 6. Please allow six to eight weeks for processing.

The Board cannot process incomplete requests, unsigned requests or requests without payment of the required \$25 per certification (For example: 3 certifications at \$25 = \$75).

The Request for Certification of Board Record(s) form must be completed and signed, as this is your authorization for the Board to release information. **The address where the certification is to be mailed must also be completed. If there is more than one mailing address, please attach a separate page listing the addresses.**

PERSONAL INFORMATION COLLECTION AND ACCESS

The information provided in this form will be used by the California Board of Accountancy to determine that accurate information is provided to the recipient of the document. Sections 5009, 5026 through 5029, 5060, 5070 through 5079, and 5150 through 5158 of the Business and Professions Code authorize the collection of this information. Failure to provide any of the required information is grounds for rejection of the form as being incomplete.

Information provided may be transferred to the Department of Justice, a District Attorney, a City Attorney, or to another government agency as may be necessary to permit the Board, or the transferee agency, to perform its statutory or constitutional duties, or otherwise transferred or disclosed as provided in Civil Code Section 1798.24.

Each individual has the right to review his or her file, except as otherwise provided by the Information Practices Act. Upon request, certain information provided may be disclosed to a member of the public under the California Public Records Act.

The Executive Officer of the California Board of Accountancy is responsible for maintaining the information in this form, and may be contacted at 2000 Evergreen Street, Suite 250, Sacramento, CA 95815, telephone number (916) 263-3680 regarding questions about this notice or access to records.

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**CERTIFICATION OF BOARD RECORD(S) REQUEST**

To expedite your request and to ensure the correct information is provided, it is very important that you provide as much identifying information on this document as possible, because individuals have the same name.

For the Board to process your request, please complete the release statement and sign your name, as this is your authorization for the Board to release information.

RELEASE STATEMENT

I hereby authorize the California Board of Accountancy to provide all pertinent information on this form. Please mail the certification to the following address:

 Printed Name

 Address

 City, State, Zip, Country

 Signature

 Date

REQUESTOR'S CONTACT INFORMATION

In case we need to contact you for additional information, please provide the Board with your current name, address, telephone number, email, and fax number.

Name _____

Address _____ Telephone No. _____

 Email _____

City, State, Zip _____ Fax No. _____

Country _____

CERTIFICATION SELECTION CHART

In the space provided below, choose the type and number of certifications needed. and calculate the total fee required.

Payment of \$25 for each certification must be enclosed with the completed request form. (For example: 3 requests for Certification #1 @ \$25 = \$75) . Incomplete requests, or requests received without the appropriate fees, will be returned without processing.

Certification Number	Description	In the spaces below, indicate how many of each certification you are requesting.	In the spaces below, calculate the total fee required.
UNIFORM CPA EXAMINATION INFORMATION			
1	Confirms successful passage of all sections of the Uniform CPA Examination and identifies the grades and dates sat for each section of the examination.		X \$25 =
2	Confirms only the successful passage of the Uniform CPA Examination.		X \$25 =
3	Confirms sitting for the Uniform CPA Examination and identifies the grades and dates sat for each section of the examination.		X \$25 =
CPA LICENSE INFORMATION			
4	Provides the license status of an individual CPA.		X \$25 =
FIRM LICENSURE			
5	Provides the status of a CPA firm.		X \$25 =
EMPLOYER LICENSURE VERIFICATION			
6	Provides the license status of an individual CPA.		X \$25 =
CERTIFIED COPIES OF CERTIFICATE OF EXPERIENCE (Formerly Form E or Form G)			
7	Provides certified copies of all Certificates of Experience on file.		X \$25 =
CERTIFIED COPIES OF TRANSCRIPTS			
8	Provides certified copies of all transcripts on file.		X \$25 =
EXAMINATION AND LICENSURE INFORMATION			
9	Document sent to another state board, or third party, and provides Uniform CPA examination grades, California ethics exam results (if applicable), CPA license status (if applicable), and disciplinary action (if applicable).		X \$25 =

Total Number of Certifications requested _____	X \$25 = Total Fee Due _____
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REQUIRED ADDITIONAL INFORMATION

After determining the type of certification needed from the Certification Selection Chart on page 4, complete the section that corresponds with the type of certification requested. **It is very important that you provide as much identifying information as possible.**

UNIFORM CPA EXAMINATION INFORMATION

Certification #1 – Confirms successful **passage** of all sections of the Uniform CPA Examination and identifies the grades and dates sat for each section of the examination.

Certification #2 – Confirms only the successful passage of the Uniform CPA Examination.

Certification #3 – Confirms sitting for the Uniform CPA Examination and identifies the grades and dates sat for each section of the examination.

If you are requesting Certifications 1-3, provide the following information:

If applicable, California Unique Identifier Number _____

Full name used on California CPA Examination Application _____

Last date sat for the Uniform CPA Examination in California _____

Date final part of the Uniform CPA Examination passed in California _____

Uniform CPA Examination grades transferred from the state of _____

Passed the International Uniform CPA Qualifications Examination (IQEX) ☐ Yes ☐ No

CPA LICENSE INFORMATION

Certification #4 – Provides the license status of an individual CPA. If you are requesting Certification 4, provide the following information:

Have you applied for a California CPA License? ☐ Yes ☐ No Date applied for Licensure _____

If yes, supply the following: _____

Full Name (no initials) _____

Address _____

Telephone No. _____
Area Code Office Number Area Code Home Number

Birthdate _____ Social Security No. _____

Are you licensed to practice public accounting in California? ☐ Yes ☐ No

California License No. _____ Issue Date _____ Expiration Date _____

FIRM LICENSURE

Certification #5 – Provides the status of a CPA firm. If you are requesting Certification 5, provide the following information:

Type of firm license ☐ Partnership ☐ Corporation ☐ Fictitious Name

Name of Firm _____ Firm License No. _____

EMPLOYER LICENSURE VERIFICATION

Certification #6 – Provides the license status of an individual CPA. If you are requesting Certification 6, provide the following information:

Full Name of Licensee (If known, middle name and/or initial) _____

If known, License No. _____

CERTIFIED COPIES OF CERTIFICATE OF EXPERIENCE (Formerly Form E or Form G)

Certification #7 – Provides certified copies of Certificates of Experience (**\$25 for all Certificates of Experience on file**). If you are requesting Certification 7, provide the following information:

Full Name _____ License No. (if applicable) _____

CERTIFIED COPIES OF TRANSCRIPTS

Certification #8 – Provides certified copies of transcripts (**\$25 for all transcripts on file**). If you are requesting Certification 8, provide the following information:

Full Name _____ License No. (if applicable) _____

AUTHORIZATION FOR RELEASE OF EXAMINATION & LICENSURE INFORMATION

Certification #9 – This document is typically sent to another State board, or third party, and provides CPA examination grades, California ethics exam results (if applicable), CPA license status (if applicable), and disciplinary action (if applicable). If you are requesting Certification 9, provide the following information:

NON LICENSEE

If applicable, California Unique Identifier Number _____

Full name used on California CPA Examination Application _____

Last date sat for the Uniform CPA Examination in California _____

Date final part of the Uniform CPA Examination passed in California _____

Uniform CPA Examination grades transferred from the state of _____

Passed the International Uniform CPA Qualifications Examination (IQEX) ☐ Yes ☐ No

LICENSEE

Are you licensed to practice public accountancy in California? ☐ Yes ☐ No

California License No. _____ Expiration Date _____

Full Name (no initials) _____

Address _____

Telephone No. _____
Area Code Office Number Area Code Home Number

Birthdate _____ Social Security No. _____

OTHER

